

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☒ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

**VOTE 2 REDUCE DEBT (V2RD)**

ADDRESS (number and street)

1005 CONGRESS AVE STE 350

☐ (Check if address is changed)

AUSTIN

CITY ▲

TX

STATE ▲

78701

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

Fec@vote2reducedebt.com

Optional Second E-Mail Address

soleary@goberhilgers.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

www.vote2reducedebt.com

2. DATE

08 / 29 / 2014

3. FEC IDENTIFICATION NUMBER ►

C C00563064

4. IS THIS STATEMENT ☐ NEW (N) OR ☒ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. KENNETH W. DAVIS JR.

Signature of Treasurer Mr. KENNETH W. DAVIS JR.

[Electronically Filed]

Date

08

29

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)

## 5. TYPE OF COMMITTEE

**Candidate Committee:**

- (a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation \_\_\_\_\_ Office Sought: ☐ House ☐ Senate ☐ President State \_\_\_\_\_ District \_\_\_\_\_

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

**Party Committee:**

- (d) ☐ This committee is a \_\_\_\_\_ (National, State or subordinate) committee of the \_\_\_\_\_ (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☒ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

**Committees Participating in Joint Fundraiser**

1. \_\_\_\_\_ FEC ID number C \_\_\_\_\_

2. \_\_\_\_\_ FEC ID number C \_\_\_\_\_

3. \_\_\_\_\_ FEC ID number C \_\_\_\_\_

4. \_\_\_\_\_ FEC ID number C \_\_\_\_\_

Write or Type Committee Name

**VOTE 2 REDUCE DEBT (V2RD)****6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

SHANNON OLEARY

Mailing Address

1005 CONGRESS AVE

STE 350

AUSTIN

TX

78701

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records

Telephone number

512

354

1784

**8. Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).Full Name  
of Treasurer

Mr. KENNETH W. DAVIS JR.

Mailing Address

PO Box 999

FORT WORTH

TX

76101

Title or Position  
Treasurer

CITY

STATE

ZIP CODE

Telephone number

817

332

4081

Full Name of  
Designated  
Agent

SHANNON OLEARY

Mailing Address

1005 CONGRESS AVE

STE 350

AUSTIN

TX

78701

CITY

STATE

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

512

354

1784

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

OMNIAMERICAN

Mailing Address

1320 S UNIVERSITY DR

STE 110

FORT WORTH

TX

76107

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Wells Fargo

Mailing Address

900 D Ranch Road 620 S

Austin

TX

78734

CITY

STATE

ZIP CODE